

# A Key Informant Survey As a Tool in Jewish Communal Planning: The Survey on Aging in Jewish Communities

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The effort to address service needs requires data of various types: data on needs, data on the services, data on unmet needs and on the priorities assigned to these needs. Demographic data can play an important role in the process of service planning and resource allocation in a number of ways. The demographic situation (such as marital status and living arrangement) helps to define the nature of needs. It also helps to identify groups in which various kinds of needs are concentrated and thus becomes a basis for outreach and targeting (e.g. mental health problems focused in particular age or ethnic groups). It can also be used as a basis for projecting service needs into the future or extrapolating across regions (using the correlation between demographic data and needs data).

In attempting to fill these data needs, there are a number of possible sources: micro-population surveys, administrative records and key informants (such as community leaders and professionals). Each source has its advantages and disadvantages, and an optimal strategy should combine the three. Key informants may play several roles. On the one hand there is certain information for which they are the only source, such as plans for the future, priorities, policies and attitudes. On the other hand they may serve as an alternative source of information when more objective data are not available, such as an evaluation of unmet needs. Finally, the perception by key informants of the objective situation is itself significant, irrespective of how valid one may consider it to be since their perception of demographic trends will influence policies. It is therefore important to understand those perceptions.

We report here on an effort to make use of a key informant survey to facilitate the process of community planning with respect to the needs of the Jewish elderly and the implications of the aging of Jewish communities. The survey has several unique features. It has been carried out in three languages in an international comparative framework of Jewish communities throughout the world. It has been conducted at two points in time, 1985 and 1989, with a set of core questions and special emphases at each point in time. It has been carried out as part of a broader effort to promote coordination among Jewish communities in their efforts to address the consequences of their changing age structure. This effort has the following components: an international coordinating council based on regional councils; a program of professional symposia; a publication program including a newsletter published in

French, Spanish and English; inter-community consultation and exchange. Thus both stages of the survey were conducted as part of the preparation of background material for international symposia at which the findings were discussed.

The first stage of the survey had several focuses: trends in the services provided for the elderly; the demographic information available to the communities and the assumptions about demographic trends on which planning was based; approaches used to evaluate and plan services; problems in meeting the needs and issues faced by the communities; and the trend in the needs and services for the elderly as opposed to other groups in the community.

In the second stage of the survey, the basic questions on trends were repeated, however the major focus was on four specific issues: how changing circumstances are affecting the care for the frail elderly; what are the changes in the role of the Jewish family, their implications and the community response; what are the special challenges posed by the trend toward early retirement and the increasing numbers of well elderly; and what are the efforts being made to promote intergenerational activity and relations within the Jewish community?

Both rounds of the survey were conducted on the basis of a mail questionnaire sent to the planning director in large communities or the professional leadership in smaller communities. In the second round a questionnaire was also sent to the director of every Jewish long-term care institution. The responses in the first stage covered 71% of North American Jewry and almost 90% of Jews from other regions. Data collection has not as yet been fully completed in the second round of the survey. The response rate thus far has been similar in North America, South America, South Africa and the Far East, but much less satisfactory in Europe.

We want to briefly illustrate some of the kinds of findings and their relevance to Jewish communal planning.

In the first round we found that the data on the number of Jewish elderly were available in 90% of the communities; however, more detailed data on the number of elderly in the institutions or on characteristics, such as sex or marital status, were available in less than half the communities. Only about 10% of the communities had any data on the needs of the elderly, such as the number of disabled.

Another focus of the questionnaire was the overall consequences of the aging process for the needs that the community must address. Generally, as communities age, the needs of the elderly increase while the needs of younger age groups decline so that the total increase in needs is more moderate. However, the increase in total needs is also related to what is happening to overall population growth as the age structure changes. If the overall population is declining, then the number of elderly could also decline even though their percentage in the population increases. Although in such circumstances there will be less of an increase in total community needs, the needs of the elderly could still increase because of changes in their composition, such as more women and more old-old. Against the background of these various hypothetical scenarios, it is interesting to note the responses of the communities. The communities reported in the first stage of the survey that they were experiencing increases in needs even for the young. This reflects perhaps the growing concern with Jewish education which more than offsets the decline in the numbers of children that have to be educated.

The first stage of the survey also addressed the response of the communities to the increase in needs. The Jewish community is perceived as the major source of services for the Jewish elderly (except for retirement pensions and basic medical care), although this is somewhat less the case in Western Europe. Despite the considerable discussion of the general crisis in the welfare state and of the decline in public social welfare expenditures, there proved to be considerable variation in the experience of Jewish communities. About half report an increase in external governmental support and half a decline. By contrast, the response of the communities to the increase in needs was very similar. The communities universally reported expanding the services to the elderly in the five years prior to the survey and plans to expand the services further in the future were widespread. The communities seem to have made a commitment to maintaining their role as the primary source of care for the Jewish elderly and are making every effort to meet the increase in need.

The second stage of the survey, conducted in 1989, confirmed the continuation of some of these broad trends. Thus, for example, the planned expansion in services reported in the first stage was shown in the second stage to have been realized and, looking ahead, almost all communities are planning to expand the services even further.

As noted, special focuses in the second stage were the needs of the disabled elderly and changes in the Jewish family. As only partial data is as yet available we shall just highlight a few emerging findings.

The communities reported that the needs of the disabled elderly were continuing to increase. However, in many communities this is not due to a further increase in the number of disabled, but rather to reported declines in the availability of family support, so that more of the needs have to be met by the community. In some communities declines in the availability of external government support or non-Jewish services were also factors in increasing the needs confronting the Jewish community. As found in the first stage the communities were expanding their services; however, less than half felt that their efforts would be sufficient to meet the full increase in needs. The reported decline in the role of the family was practically universal outside of North America, although it was reported by about 60% of the North American communities as well. The families were reported to be less willing or able to provide direct assistance, finance and even social contact to serve as go-between with the formal service system. There was variation among the communities in strategies for dealing with this decline. In North America there was more of an emphasis on the need to provide formal services as an alternative to the family and to ease some of the burden, whereas in other areas there was more of an emphasis on efforts to educate the families to maintain their role.

It is of interest to link the findings in the survey to the broader demographic trends occurring in the Jewish world during this period as they have been documented by Schmelz (1984, 1989). Despite the decline of the total Jewish population in the last 15 years in the Diaspora, the over-75 population has increased by almost 30% as a whole, and even more rapidly within North America. Furthermore, the degree of population aging is more advanced in communities outside of North America. Taken together, these facts are consistent with the perceptions of the communities. The rise in the 75 and over population is consistent

with the reported increase in the number of disabled elderly, particularly in North America. The difference in the aging process between North America and other parts of the Jewish world is consistent with the way the communities perceived the family's role in caring for the elderly. For example, in North America there was a greater emphasis on using the formal sector as an alternative to the family, as opposed to interest in other parts of the Jewish world in maintaining or strengthening the family's role; as these communities are also much closer to what are perhaps the limits of the role of formal services.

Looking ahead, it should be noted that we have reached a new phase in the aging process, as the over 75 population will be generally stable. This could lead to a change in the trend of growth of the needs of the elderly population. At the same time this growth will, all the more crucially, depend upon what happens to the role of the Jewish family in caring for the elderly. Will its role continue to decline or will it stabilize at its present level?

We feel that the experience with the survey has demonstrated the potential contribution of data of this kind to the process of community planning, and has also illustrated the usefulness of integrating the evaluation of broad demographic trends with perceptions on the community level as to how needs are changing and how communities are responding.

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